LOUISIANA BOARD OF ETHICS

Post Office Box 4368 Baton Rouge, Louisiana 70821

FINANCIAL DISCLOSURE STATEMENT

(Pursuant to La. R.S. 42:1114)

REPORTS ARE FILED ANNUALLY COVERING THE PREVIOUS CALENDAR YEAR

THE FOLLOWING PERSONS ARE REQUIRED TO FILE A FINANCIAL DISCLOSURE STATEMENT:

- **A Public Servant** and each member of his immediate family who:
 - > Derives anything of economic value, directly, through any transaction involving the agency of such public servant; or
 - > Derives anything of economic value of which he may be reasonably expected to know through a person which:
 - Is regulated by the agency of such public servant; or
 - Has bid on or entered into or is in any way financial interested in any contract, subcontract, or any transaction under the supervision or jurisdiction of the agency of such public servant.
 - ➤ IF REQUIRED TO FILE, **SCHEDULE A** MUST BE COMPLETED.
- ❖ **A LEGISLATOR** and each member of his immediate family who:
 - > Derives anything of economic value, directly, through any transaction involving the legislator's agency; or
 - > Derives anything of economic value of which he may be reasonably expected to know through a person which has bid on or entered into or is in any way financially interested in any contract, subcontract, or any transaction involving the legislator's agency.
 - ➤ IF REQUIRED TO FILE, **SCHEDULE A** MUST BE COMPLETED.
- OTHER THAN A LEGISLATOR, **AN ELECTED OFFICIAL**, his spouse, and any business enterprise in which he has an interest (greater than 10%) who:
 - > Derives anything of economic value through a contract or other subcontract from the state or any political subdivision.
 - ➤ IF REQUIRED TO FILE, **SCHEDULE B** MUST BE COMPLETED.

THE DISCLOSURE STATEMENT MUST BE FILED ON OR BEFORE MAY 1

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FINANCIAL DISCLOSURE STATEMENT

(Pursuant to La. R.S. 42:1114)

DISCLOSURE STATEMENTS ARE FILED ANNUALLY ON OR BEFORE MAY 1

CALENDAR YEAR	COVERED:	
FILER: □ PUBLIC SERVANT □ LEGISLATOR □ ELECTED OFFICIAL	☐ SPOUSE OF PUBLIC SERVANT ☐ SPOUSE OF LEGISLATOR ☐ SPOUSE OF ELECTED OFFICIAL	☐ IMMEDIATE FAMILY MEMBER OF PUBLIC SERVANT ☐ IMMEDIATE FAMILY MEMBER OF LEGISLATOR ☐ BUSINESS ENTERPRISE OF ELECTED OFFICIAL
Name of Filer (print)	:	
Name of Public Serv	vant (print):	
Position Held:		
Name of Departmen	nt/Agency/Division:	
		Signature of Filer
		Date

[&]quot;Public Servant" means a public employee or an elected official.

[&]quot;Elected Official" means any person holding an office in a governmental entity which is filled by the vote of the appropriate electorate. It shall also include any person appointed to fill a vacancy in such offices.

[&]quot;Immediate Family" as the term relates to a public servant means his children, the spouses of his children, his brothers and their spouses, his sisters and their spouses, his parents, his spouse, and the parents of his spouse.

[&]quot;Legislator" means any person holding office in the Senate or the House of Representatives of the Louisiana Legislature which is filled by the vote of the appropriate electorate.

[&]quot;Business Enterprise" shall be included in the disclosure statement only if the elected official and/or his spouse owns at least ten percent of such enterprise.

SCHEDULE A

(La. R.S. 42:1114A, 1114B)

Transactions Involving Public Servant's Agency

NATURE OF BUSINESS ACTIVITY:
AMOUNT OF INCOME OR VALUE OF THING OF ECONOMIC VALUE: NAME OF BUSINESS (IF APPLICABLE):
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NATURE OF BUSINESS ACTIVITY:
AMOUNT OF INCOME OR VALUE OF THING OF ECONOMIC VALUE: NAME OF BUSINESS (IF APPLICABLE):

SCHEDULE B

(La. R.S. 42:1114C)

Transactions Involving the State or any Political Subdivision

NAME OF STATE AGENCY/POLITICAL SUBDIVISION:
ADDRESS:CITY, STATE, ZIP:
NATURE OF BUSINESS ACTIVITY:
AMOUNT OF INCOME OR VALUE OF THING OF ECONOMIC VALUE:
NAME OF STATE AGENCY/POLITICAL SUBDIVISION:
ADDRESS:
CITY, STATE, ZIP:
NATURE OF BUSINESS ACTIVITY:
AMOUNT OF INCOME OR VALUE OF THING OF ECONOMIC VALUE:
NAME OF STATE AGENCY/POLITICAL SUBDIVISION:
ADDRESS:
CITY, STATE, ZIP:
NATURE OF BUSINESS ACTIVITY:
AMOUNT OF INCOME OR VALUE OF THING OF ECONOMIC VALUE:
NAME OF STATE AGENCY/POLITICAL SUBDIVISION:
ADDRESS:
CITY, STATE, ZIP:
NATURE OF BUSINESS ACTIVITY:
AMOUNT OF INCOME OR VALUE OF THING OF ECONOMIC VALUE:
NAME OF STATE AGENCY/POLITICAL SUBDIVISION:
ADDRESS:
CITY, STATE, ZIP:
NATURE OF BUSINESS ACTIVITY:
AMOUNT OF INCOME OR VALUE OF THING OF ECONOMIC VALUE: